

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL**
FOR: HEALTH CARE FINANCING ADMINISTRATION

1. TRANSMITTAL NUMBER:

01-01-0

2. STATE:

MN

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL
SECURITY ACT (MEDICAID)TO: REGIONAL ADMINISTRATOR
HEALTH CARE FINANCING ADMINISTRATION
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

July 1, 2001

5. TYPE OF PLAN MATERIAL (Check One):

☐ NEW STATE PLAN☐ AMENDMENT TO BE CONSIDERED AS NEW PLAN☒ AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION:

Sections 1902(a)(10)(A)(ii)(X), 1902(a)(10)(C),
1902(r)(2), 1905(a)

7. FEDERAL BUDGET IMPACT:

a. FFY '01 \$ 1,315,000b. FFY '02 \$ 7,892,000

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

Pp. 13a, 22, 25a of Attach. 2.2-A; p. 1 of Supp. 1
to Attach. 2.2-A; p. 5, Supp. 1 to Attach. 2.6-A; pp
5, 6, 7 to Supp. 2 of Attach. 2.6-A; p. 1, Supp. 4
of Attach. 2.6-A; p. 4, Supp. 8a of Attach. 2.6-A;
p. 2, Supp. 8b to Attach. 2.6-A9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (If Applicable):

10. SUBJECT OF AMENDMENT:

Revisions to income and resource standards and methodologies for elderly, blind and disabled,
including certain disabled children.

11. GOVERNOR'S REVIEW (Check One):

☒ GOVERNOR'S OFFICE REPORTED NO COMMENT☐ OTHER, AS SPECIFIED:☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL:

13. TYPED NAME:

Mary B. Kennedy

14. TITLE:

Medicaid Director

15. DATE SUBMITTED:

September 10, 2001

16. RETURN TO:

Stephanie Schwartz
Minnesota Department of Human Services
444 Lafayette Road
St. Paul, MN 55155-3853

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED:

9-14-01

18. DATE APPROVED:

11/13/01

PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL:

July 1, 2001

21. TYPED NAME:

Cheryl A. Harris

20. SIGNATURE OF REGIONAL OFFICIAL:

22. TITLE:

Associate Regional Administrator
Division of Medicaid and Children's Health

23. REMARKS:

RECEIVED

SEP 14 2001

DMCH - MI/MN/WI

MINNESOTA
MEDICAL ASSISTANCE
Fiscal Analysis of State Plan Amendment **TN 01-10** to
Increase Income for Elderly & Disabled, including Disabled Children, and
Raise Income Disregards for Medically Needy Aged, Blind and Disabled
Effective July 1, 2001

This change increases the income standard for the elderly and disabled to 95% of FPG, effective July 1, 2001 along with an income disregard. Also changed is the level of income retained by the medically needy aged, blind and disabled; with income disregards, this level increases to 70% of poverty on July, 2001 and to 75% of poverty on July, 1, 2002. It will eliminate the monthly spenddown for some cases and reduce it for others. It will also increase the cost for the QMB-only cases and extend eligibility to some new cases. Two (2) months of payments are assumed in FFY 2001 for the current July - September quarter.

A summary of these estimates and their funding is as follows:

	<u>FFY 2001</u>	<u>FFY 2002</u>
	(Dollars in Thousands)	
Spenddown Eliminated:		
Elderly Cases -----	2,097	2,097
Disabled Cases -----	2,730	2,730
Elderly Cost -----	\$ 451	\$ 2,708
Disabled Cost -----	\$ 598	\$ 3,590
Spenddown Reduced:		
Elderly Cases -----	1,553	1,553
Disabled Cases -----	1,953	1,953
Elderly Cost -----	\$ (3)	\$ (19)
Disabled Cost -----	\$ (4)	\$ (23)
QMB-only Cases Affected:		
Elderly Cases -----	2,714	2,714
Disabled Cases -----	1,077	1,077
Elderly Cost -----	\$ 767	\$ 4,602
Disabled Cost -----	\$ 372	\$ 2,233
New Enrollees:		
Elderly Cases -----	593	593
Disabled Cases -----	343	343
Elderly Cost -----	\$ 196	\$ 1,174
Disabled Cost -----	\$ 113	\$ 677
Totals:		
Elderly Cases -----	6,957	6,957
Disabled Cases -----	6,103	6,103
Elderly Cost -----	\$ 1,411	\$ 8,465
Disabled Cost -----	\$ 1,079	\$ 6,477
<hr/>		
Total MA cost -----	\$ 2,490	\$ 14,942
State Share -----	\$ 1,217	\$ 7,305
Federal Share (.5111%) -----	\$ 1,273	\$ 7,637

MINNESOTA
MEDICAL ASSISTANCE
Fiscal Analysis of State Plan Amendment **TN 01-10** to
Raise Income Disregards for Certain Disabled Children
Effective July 1, 2001

This change excludes child support payments, social security payments and other basic needs benefits as income to disabled children who qualify as optional categorically needy or medically needy under certain categories in which Medicaid is determined without regard to parental income. The effect of this change would be to eliminate most spenddowns for the medically needy children. (The income standard of 100% of the Federal poverty level for these children has been included in the budget for the income increase for all disabled.) The net cost for this exclusion is then estimated at 75% of the spenddown amount after the income standards change.

A summary of these estimates and the funding is as follows:

	<u>FFY 2001</u> (Dollars in Thousands)	<u>FFY 2002</u>
Before 100% FPG change:		
Certain disabled children with spenddown --	70	70
Average monthly spenddown -----	\$ 333	\$ 333
Number of months in FFY affected -----	2	12
Annual value of spenddown -----	\$ 47	\$ 280

After 100% FPG change:		
Certain disabled children with spenddown --	12	12
Average monthly spenddown -----	\$ 626	\$ 626
Number of months in FFY affected -----	2	12
Annual value of spenddown -----	\$ 15	\$ 90

Total Cost:		
FFY 2001 (15 x 75%) -----	\$ 11	
FFY 2002 (90 x 75%) -----		\$ 68

Total MA cost -----	\$ 11	\$ 68
State Share -----	\$ 5	\$ 33
Federal Share (.5111%) -----	\$ 6	\$ 35

DHS Reports & Forecasts Div.

September 6, 2001

MINNESOTA
MEDICAL ASSISTANCE
Fiscal Analysis of State Plan Amendment **TN 01-10** to
Allow the MA-EPD Asset Standards to be Used for One Year
For Former MA-EPD Eligibles who Remain on Medicaid
Effective July 1, 2001

The asset change would allow MA eligibility to be based on the the MA-EPD standards for up to one year after they are no longer employed. The average monthly persons projected to be affected by this change is 60. A summary of the estimate and their funding is as follows:

	<u>FFY 2001</u> (Dollars in Thousands)	<u>FFY 2002</u>
12-Month Asset Exception:		
Average monthly exception eligibles ----	60	60
Number of months eligible -----	2	12
Average monthly cost -----	\$ 597.00	\$ 597.00

Total Annual Cost:		
FFY 2001 (60 x 2 x \$597) -----	\$ 72	
FFY 2002 (60 x 12 x \$597) -----		\$ 430

Total MA cost for asset change:		
FFY 2001 -----	\$ 72	
FFY 2002 -----		\$ 430
State Share -----	\$ 36	\$ 210
Federal Share (.5111%) -----	\$ 36	\$ 220

	<u>FFY 2001</u> (Dollars in Thousands)	<u>FFY 2002</u>
Total MA Cost for TN 01-10 from income increase for ABD, disregard increase for certain disabled children, and asset increase for former MA-EPD :	\$ 2,573	\$ 15,440
Total State Share	\$ 1,258	\$ 7,548
Total Federal Share	\$ 1,315	\$ 7,892

Revision: HCFA-PM-91-4 (BPD)
August 1991

ATTACHMENT 2.2-A
Page 13a
OMB No.: 0938-

State: MINNESOTA

Citation	Groups Covered
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B. Optional Groups Other Than the Medically Needy (Continued)

 (5) Individuals receiving active treatment as inpatients in psychiatric facilities or programs (who are under the age of). Inpatient psychiatric services for individuals under age 21 are provided under this plan.

 X (6) Other defined groups and ages as specified in **Supplement 1** of Attachment 2.2-A.

TN No. 01-10

Supersedes

TN No. ~~91-20~~

91-26

Approval Date

Effective Date 7/01/01

State: MINNESOTA

Agency*	Citation(s)	Groups Covered
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B. Optional Groups Other Than the Medically Needy
(Continued)

- | | | |
|---|----------|--|
| 1902(a)(10)(A)
(ii)(X) and
1902(m)(1) and (3)
of the Act | <u>X</u> | 16. Individuals - <ul style="list-style-type: none">a. Who are 65 years of age or older or who are disabled,
As determined under section 1614(a)(3) of the Act. Both
Aged and disabled individuals are covered under this
eligibility group.b. Whose income does not exceed the income level specified
in <u>Supplement 1 to ATTACHMENT 2.6-A</u> (95 percent) as
a percent of the Federal income poverty level for a family
of the same size; andc. Whose resources do not exceed the maximum amount
allowed under the State's medically needy category for
aged, blind and disabled. |
|---|----------|--|

TN No. 01-10
Supersedes
TN No. 91-26

Approval Date _____

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HCFA ID: 7983E

Revision: HCFA-PM-91-4 (BPD)
August 1991

ATTACHMENT 2.2-A
Page 25a
OMB No.: 0938-

State: MINNESOTA

Citation	Groups Covered
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C. Optional Coverage of the Medically Needy (Continued)

- _____ (2) Individuals in adoptions subsidized in full or part by a public agency (who are under the age of _____).
- _____ (3) Individuals in NFs (who are under the age of _____). NF services are provider under this plan.
- _____ (4) In addition to the group under (b)(3), individuals in ICFs/MR (who are under the age of _____).
- _____ (5) *Individuals receiving active treatment as inpatients in psychiatric facilities or programs (who are under the age of ____).* Inpatient psychiatric services for individuals under age 21 are provided under this plan.
- X (6) Other defined groups and ages as specified in **Supplement 1** of Attachment 2.2-A.

TN No. 01-10

Supersedes

TN No. ~~91-20~~

91-24

Approval Date _____

Effective Date 7/01/01

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Minnesota

Reasonable Classifications of Individuals Under the Age of 21, 20, 19 and 18

B.7(b)(6): Optional Groups Other Than the Medically Needy

Optional Disabled Children under age 18.

1902(a)(10)(A)
(ii)(X), 1902(e)(3)
1905(a)(i) of the Act

Children under age 18, who would be eligible for Medicaid under the plan if they were in a medical institution, who meet the criteria under section 1902(e)(3) and for whom the state has made a determination as required under section 1902(e)(3)(B), who have an income level at or below the level in §1902(m) specified in Supplement 1, page 5 to Attachment 2.6-A using the state's more restrictive income requirements for Medicaid than SSI specified in Supplement 4 to Attachment 2.6-A, and the less restrictive methods specified in Supplement 8a to Attachment 2.6-A.

Optional Children under Age 21 Who Would be Institutionalized but for Home and Community-based Services.

1902(a)(10)(A)
(ii)(VI) and (X)
and 1905(a)(i)

Children who would be eligible for Medicaid under the plan if they were in a medical institution and who, but for the receipt of home and community-based services under a waiver granted under 42 CFR Part 441 would require care in a medical institution, and who will receive services under the waiver; who have an income level at or below the level of §1902(m) specified in Supplement 1, page 5 to Attachment 2.6-A, using the state's more restrictive income requirements for Medicaid than SSI specified in Supplement 4 to Attachment 2.6-A, and the less restrictive income methods specified in Supplement 8a to Attachment 2.6-A.

C.6(b)(6): Optional Coverage of Medically Needy

Medically Needy Disabled Children under Age 18

1902(a)(10)(C)
1905(a)(i) and

Children who are under age 18, who would be eligible for Medicaid under the plan if they were in a medical institution, who meet the criteria under section 1902(e)(3) and for whom the state has made a determination as required under section 1902(e)(3)(B), who have an income level at or below the medically needy level applicable to the disabled in Supplement 1, page 6 to Attachment 2.6-A, using the state's more restrictive income requirements for Medicaid than SSI specified in Supplement 4 to Attachment 2.6-A, and the less restrictive methods specified in Supplement 8a to Attachment 2.6-A.

Medically Needy Children under Age 21 Who Would be Institutionalized bur for Home and Community-based Services

1902(a)(10)(C)
1905(a)(i)

Children who would be eligible for Medicaid under the plan if they were in a medical institution and who, but for the receipt of home and community-based under a waiver granted under 42 CFR Part 441, would require care in a medical institution, and who will receive services under the waiver; and who have an income level at or below the medically needy level applicable to the disabled in Supplement 1, page 6 to Attachment 2.6-A, using the state's more restrictive income requirements for Medicaid than SSI specified in Supplement 4 to Attachment 2.6-A, and the less restrictive income methods specified in Supplement 8a to Attachment 2.6-A

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Minnesota

Income Eligibility Levels (Continued)

3. Aged and Disabled Individuals:

/X/ The levels for determining income eligibility for groups of aged and disabled individuals under the provisions of section 1902(m)(4) of the Act are as follows:

Based on 95 percent of the official Federal income poverty line.

Family Size	Income Level
<u>1</u>	\$ <u>683</u>
<u>2</u>	\$ <u>920</u>
<u>3</u>	\$ <u>1,159</u>
<u>4</u>	\$ <u>1,398</u>
<u>5</u>	\$ <u>1,637</u>
<u>6</u>	\$ <u>1,876</u>
<u>7</u>	\$ <u>2,115</u>
<u>8</u>	\$ <u>2,354</u>
<u>9</u>	\$ <u>2,594</u>
<u>10</u>	\$ <u>2,831</u>

If an individual receives title II benefits, any amount attributable to the most recent increase in the monthly insurance benefit as a result of a title II COLA is not counted as income during a "transition period" beginning with January, when the title II benefit for December is received, and ending with the last day of the month following the month of publication of the revised annual Federal poverty level.

For individuals with title II income, the revised poverty levels are not effective until the first day of the month following the end of the transition period.

For individuals not receiving title II income, the revised poverty levels are effective no later than the beginning of the month following the date of publication.

42 CFR 435.236
42 CFR 435.1005

4. Institutionalized Individuals Under a Special Income Standard:

/X/ The level of income is equal to 300 percent of the SSI benefit amount payable under section 1611(b)(1) of the Act to an individual in his own home who has no income or resources.

TN No. 01-10
Supersedes
TN No. 99-02

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: MINNESOTA

b. Optional Group of Children

/ Same as resource levels in the State's approved AFDC plan.

/X/ Less restrictive than the AFDC levels and are as follows:

No resource test is applied to the following optional groups of children listed in Attachment 2.2-A:

B.7.a. Children under age 21 how meet AFDC requirements;

B.7.b. Other reasonable classifications of optional groups of children described in Supplement 1 to Attachment 2.2-A;

B.8. Children under age 21 who are under an adoption assistance agreement;

B.19. Optional Targeted Low-income Children

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: MINNESOTA

4. Aged and Disabled Individuals

 Same as SSI resources levels

 More restrictive than SSI resource levels and are as follows:

Family Size

Resource Level

 1

 No resource test applied.

 2

 X Same as medically needy resource levels

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: MINNESOTA

RESOURCE LEVELS (continued)

B. MEDICALLY NEEDY

Applicable to all groups - /X/ Except those specified below.

<u>Family Size</u>	<u>Resource Level</u>
<u>1</u>	<u>\$3750</u>
<u>2</u>	<u>6450</u>
<u>3</u>	<u>6650</u>
<u>4</u>	<u>6950</u>
<u>5</u>	<u>7100</u>
<u>6</u>	<u>7300</u>
<u>7</u>	<u>7500</u>
<u>8</u>	<u>7700</u>
<u>9</u>	<u>7900</u>
<u>10</u>	<u>8150</u>
For each additional person	<u>200</u>

No resource test is applied to medically needy groups of children listed in Attachment 2.2-A:

C.3. Children under 18 who but for income and resources would be mandatory categorically eligible.

C.5.a. Children under age 21 not described in C.3

C.5.b. Other reasonable classifications of medically needy children described in Supplement 1 to Attachment 2.2-A.

TN No. 01-10
Supersedes
TN No. 93-32

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HCFA ID:7985E

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: MINNESOTA

METHODS FOR TREATMENT OF INCOME THAT DIFFER FROM
THOSE OF THE SSI PROGRAM

(Section 1902(f) more restrictive methods and criteria and State supplement criteria in SSI criteria States without section 1634 agreements and in section 1902(f) States. Use to reflect more liberal methods only if you limit to State supplement recipients. DO NOT USE this supplement to reflect more liberal policies that you elect under the authority of section 1902(r)(2) of the Act. Use Supplement 8a for section 1902(r)(2) methods.)

- The categorically and medically needy income standards for aged, blind, and disabled are lower than the SSI income standards.
- Unusual medical expense payments by the Veterans Administration are considered income to categorically needy and medically needy aged, blind and disabled.
- The standard income disregard of \$20 is not applied.

TN No. 01-10

Supersedes

TN No. 97-32

Approval Date _____

Effective Date 7/01/01

HCFA ID:7985EII

POLICY	HOW POLICY IS MORE LIBERAL	GROUPS TO WHICH POLICY IS APPLIED
<p>Add'l ABD Income Disregard. Effective July 1, 2001 through June 30, 2002, disregard the difference between the individual's income in excess of the income standard in Supplement 1 to Attachment 2.6-A, page , and 70 percent of the Federal poverty levels by family size based on Federal poverty levels in effect on July 1, 2001.</p> <p>Effective July 1, 2002, disregard the difference between the individual's income in excess of the income standard in Supplement 1 to Attachment 2.6-A, page , and 75 percent of the Federal poverty levels by family size, based upon revised Federal poverty levels for calendar year 2002. Thereafter adjust the disregard on each July 1 based on revised Federal poverty levels published for the calendar year.</p>	SSI has no similar disregard.	<p><u>Mandatory categorically needy aged, blind and disabled under §1902(f) and medically needy aged, blind and disabled under §1902(a)(10)(C).</u></p> <p><u>Medically needy disabled children under 18. §§ 1902(e), 1905(a)(i) and 1902(a)(10)(C).</u></p> <p><u>Medically needy disabled children under age 21 who would be institutionalized but for HCB services under a §1915(c) waiver; §§1905(a)(i), 1915(c), 1902 (a)(10)(C).</u></p>
<p>COLA delay disregard. Disregard the annual RSDI cost of living adjustment from January 1 through June 30th of each year.</p>	SSI has no similar disregard.	<p><u>Mandatory categorically needy aged, blind and disabled under §1902(f) and medically needy aged, blind and disabled under §1902(a)(10)(C).</u></p> <p><u>Medically needy disabled children under 18. §§ 1902(e), 1905(a)(i) and 1902(a)(10)(C).</u></p> <p><u>Medically needy disabled children under age 21 who would be institutionalized but for HCB services under a §1915(c) waiver; §§1905(a)(i), 1915(c), 1902 (a)(10)(C).</u></p>
<p>Disregard for Elderly and Disabled Under §1902(m). Effective July 1 through June 30 of the following year, disregard the difference between the income standard and 100 percent of the Federal poverty levels, using 100 percent of Federal poverty levels in effect on July 1 of each 12 month period.</p> <p>The income standard will be adjusted in the first month after the publication of the revised Federal poverty levels for the calendar year. The disregard will be adjusted on the basis of revised Federal poverty levels for the calendar year on each July 1.</p>	SSI has no similar disregard.	<p><u>Elderly and disabled who meet more restrictive criteria under §1902(f) and an income level under §§1902(a)(10)(A)(ii)(X) and 1902(m).</u></p> <p><u>Optional categorically needy disabled children under 18. §§ 1902(a)(10)(A)(ii)(X), 1902(e), 1905(a)(i).</u></p> <p><u>Medically needy disabled children under 18. §§ 1902(e), 1905(a)(i) and 1902(a)(10)(C).</u></p> <p><u>Optional categorically needy children under age 21 who would be institutionalized but for HCB services; §§. 1902(a)(10)(A)(ii)(X), 1905(a)(i) and 1915(c)</u></p> <p><u>Medically needy disabled children under age 21 who would be institutionalized but for HCB services; §§1905(a)(i), 1915(c), 1902 (a)(10)(C)</u></p>
<p>Income Disregard for Certain Children. Disregard child support payments received, and social security payments received under Title II</p>	SSI has no similar disregard.	<p><u>Optional categorically needy disabled children under 18. §§1902(a)(10)(A)(ii)(X), 1902(e), 1902(m) 1905(a)(i).</u></p> <p><u>Medically needy disabled children under 18. §§1902(a)(10)(C), 1902(e), 1905(a)(i).</u></p> <p><u>Optional categorically needy children under age 21 who would be institutionalized but for HCB services; §§. 1902(a)(10)(A)(ii)(X), 1902(m), 1905(a)(i) and 1915(c)</u></p> <p><u>Medically needy disabled children under age 21 who would be institutionalized but for HCB services; §§1902 (a)(10)(C), 1905(a)(i), 1915(c).</u></p>

TN No. 01-10
Supersedes
TN No. N/A

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Revision: HCFA-PM-91-4 (BPD)
AUGUST 1991

SUPPLEMENT 8b to ATTACHMENT 2.6-A
Page 2

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: MINNESOTA

MORE LIBERAL METHODS OF TREATING RESOURCES
UNDER § 1902(r)(2) OF THE ACT

POLICY	HOW POLICY IS MORE LIBERAL	GROUPS TO WHICH POLICY IS APPLIED
Spouse Asset Exclusion: Do not count or deem assets of the ineligible spouse to the disabled person.	SSI deems assets of the ineligible spouse to the disabled applicant or recipient.	TWWIIA Basic Coverage Group. §1902(a)(10)(A)(ii)(XV).
Retirement/Medical Benefits Exclusion: In step two, Exclude the following assets of the employed disabled person: retirement accounts including individual accounts, 401(k) plans, 403(b) plans, Keogh plans, pension plans, and medical expense accounts through the employer.	SSI has no similar exclusions.	TWWIIA Basic Coverage Group. §1902(a)(10)(A)(ii)(XV).
Dual-eligible Property Exclusion. Disregard \$8,000 in nonexcluded assets for an individual, and \$15,000 for a couple.	SSI allows \$2,000 in nonexcluded assets for an individual, and \$3,000 for a couple.	Qualified medicare beneficiaries. §1902(a)(10)(E)(i). Specified low-income medicare beneficiaries. §1902(a)(10)(E)(iii). Qualified Individuals. §1902(a)(10)(E)(iv).
<u>Transition Disregard for Disabled Individuals Who Were Working.</u> <u>For individuals who become ineligible for the TWWIIA Basic Coverage Group under §1902(a)(10)(A)(ii)(XV) due to loss of earnings, and who qualify for Medicaid under another category, continue to disregard for 12 consecutive months the assets allowed and excluded under the TWWIIA Basic Coverage Group, §1902(a)(10)(A)(ii)(XV).</u>	<u>SSI has no similar disregard</u>	<u>Mandatory categorically needy aged, blind and disabled using more restrictive criteria under §1902(f)</u> <u>Optional categorically needy aged and disabled groups.</u> <u>§1902(a)(10)(A)(ii).</u> <u>Medically needy aged, blind, and disabled.</u> <u>§1902(a)(10)(C)(i)(III).</u> <u>Families under §1931</u> <u>Medically needy -families and children.</u> <u>§§1902(a)(10)(C)(i)(III), 1905(a)(i) and 1905(a)(ii).</u> <u>Optional categorically needy disabled children under 18.</u> <u>§§1902(a)(10)(A)(ii)(X), 1902(e), 1902(m) 1905(a)(i).</u> <u>Medically needy disabled children under 18.</u> <u>§§1902(a)(10)(C), 1902(e), 1905(a)(i).</u> <u>Optional categorically needy children under age 21 who would be institutionalized but for HCB services; §§</u> <u>1902(a)(10)(A)(ii)(X), 1902(m), 1905(a)(i) and 1915(c)</u> <u>Medically needy disabled children under age 21 who would be institutionalized but for HCB services; §§1902</u> <u>(a)(10)(C), 1905(a)(i), 1915(c).</u>

TN No. 01-10
Supersedes
TN No. 00-26

Approval Date _____ Effective Date Date of Federal approval
HCFA ID: 7985E